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AUTHOR Pankove, Ethel; Evans, Malcolm D.
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ABSTRACT

The paper describes the evolution of a special education delivery system in a Montgomery, New Jersey township. It is pointed out that the project's first year focused on preparing teaching, administrative, and Child Study Team members for project participation through meetings and newsletters. Noted are two goals which emerged from meeting discussions -- (1) to develop a systematic appraisal system and (2) to revise special education classification and program descriptions so that students are described in educational terms rather than handicapping conditions. The role of the school psychologist is described and a four-level consultation model is mentioned. Appended are an outline of project activities, a project plan diagram, and goals and objectives of the special task force. (SW)

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Effecting Change to a More Flexible Special Education Delivery System

Ethel Pankove and Malcolm D. Evans
Montgomery Township Schools
Skillman, N.J.

Description of District

This paper will discuss the process of change in a special education delivery model as it is evolving in Montgomery Township, a K-12 suburban school district with a population of 1370. Classified students are 9% of the population when speech problems are included, otherwise 6%. Moderately to severely involved students make up 3%; of this group 1%, including mentally retarded, severely emotionally disturbed and pre-school handicapped, are placed out-of-district. Hence, the majority of classified students could be described as mildly handicapped (Gross and Gottleib, in press). Within district all classified students are individually scheduled into the mainstream. There are 2 self-contained classes (ages 5-8 and 9-12) and 3.5 resource rooms (ages 5-18) with 5.5 special education teachers and 4 aides. Support services include 1 school psychologist, 2 learning disability teacher consultants, 1 school social worker, 1 speech therapist, 2.5 school nurses, and 1 director of special services/psychologist.

Despite a relatively strong ratio of support services and special education classes to regular classes, concerns about delivery of special education have arisen during the past five years. Some parents are fearful of the labels their children acquire in becoming eligible for special education. Child Study Team members express frustration at the decrease in flexible and efficient use of their time. Administrators are concerned about time management. And teachers, both special education and mainstream, feel a decrease in level of interaction with individual Child Study Team members.

To understand these areas of concern we need to review local school history prior to 1975. When a district philosophy and goals were developed in the 1970's, the department of special services developed its own goals consistent with the philosophy of the district. In 1980 when we reviewed those goals, a revised statement placed greater emphasis on service to a more restricted school population. What happened in those intervening years? PL94-142 was implemented; the state of NJ concentrated its staff development efforts in the areas of due process, pupil records, the IEP, and parent involvement in special education planning. Workshops for Child Study Team members focused on diagnostic testing, non-discriminatory testing, understanding federal rules and regulations, and assessment and programming for more severely handicapped children. Local autonomy decreased and directives from the state increasingly controlled the functioning of the Child Study Team and the programming of special education.

Some negative results from this necessary phase of development have included a tremendous increase in paperwork for the Child Study Team; a decrease in available time for preventative kinds of involvement with teachers and students; and an increased emphasis in working together as a Child Study Team unit with reduced opportunity to use individual expertise. Despite its recognized limitations, the diagnostic-prescriptive model became the only model for developing IEP's. (Anter and Jenkins, 1979; Coles, 1978). During this same period, parents who were fearful of the classification process sought alternatives for their youngsters; e.g., private tutoring, private day school, or allowing their children to manage as they could within the mainstream. Parent and professional pressure on the NJ legislature to revise the categorical system for special education eligibility was unsuccessful. The Special Education Reform Act of 1980 did not come to a vote.

The need for what was being called non-categorical special education still existed. Our school district had been aware of the work done by profressional groups to influence enactment of the Special Education Reform Act of 1980. The superintendent of schools, whose philosophy is rooted in human development and an organismic approach to teaching and learning (Whitehead, 1978) supported continuing efforts to appraise and provide for each handicapped student as a unique individual.

In view of the foregoing conditions, when the possibility arose to participate in a project to explore alternative approaches to the delivery of special education, there was immediate interest. A positive response was forthcoming from the superintendent and board of education, special education parents, Child Study Team, and special education teachers. However, there were individuals who were suspicious about exploring any change. In a time of declining school population and reduction in teaching staff, any proposal for change raises anxiety.

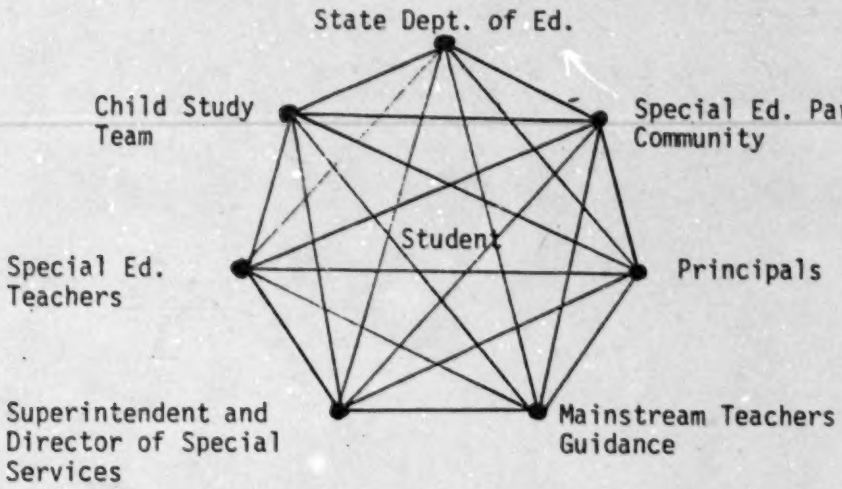
First Year of Project

During September 1981, representatives from the State Dept. of Education met with the superintendent and director of special services for orientation to the project. Later in the month, a meeting was held on site for the superintendent, principals, director of special services, and Child Study Team members. As a result of these meetings our first proposal to the state focused on a statement of need to explore alternatives. This statement was sent to the Department of Education in Oct. 1981.

Our intention at that time was to prepare teaching, administrative, and Child Study Team members for participation in the project. We were also concerned about disseminating information to parents and community. As a result, there was an average of three meetings a month involving various reference groups. There were also three issues of a special education newsletter distributed during the year. Each issue contained information about the project.

The following diagram shows the communication network involving all of the constituencies:

Communication Between State Dept. and District and
Among Groups Within District



Some of the activities of these groups are listed in Appendix I.

In structuring communication for change, we have been using a participatory model which is slow but tends to develop involvement and commitment. At the local level some difficulties with this model revolve around scheduling meetings. There are different schedules for elementary and secondary school staff and different extra-curricular activities. Fatigue of teachers after school and resistance to attending evening meetings are understandable. It was difficult for Child Study Team members to concentrate on ways to change and improve their functioning, given the pressures of daily work. According to Hersey and Blanchard (1977), within the participative change cycle there are four levels of change: knowledge, attitude, individual behavior, and group behavior. Journal articles pertinent to a non-categorical approach to special education were circulated and discussed among individuals and groups. A workshop based on Feuerstein's concept of mediated learning experience was held for teachers and parents. (Feuerstein, 1980). While we felt a need for change, we were somewhat uncertain about the direction and extent of our exploration. The process of unfreezing (Lewin, 1947) was time consuming. After years of being directive, the State Dept. of Education was granting

permission to the director of special services and Child Study Team to develop initiative and detail a plan for change while simultaneously maintaining the present assessment and classification system. We received the help of two consultants through the State Department of Education. Dr. Grace Bingham, a learning consultant, and Mr. Lewis Gantwerk, a psychologist met with the Child Study Team to define project goals and develop a plan. From discussions two goals emerged: 1) To develop a systematic appraisal system that is more efficient and more broadly based and would allow team members greater flexibility in working with teachers; and 2) To revise special education classification and program description so that students are described in terms of educational needs rather than handicapping conditions.[1] The graphic presentation in Appendix II describes the planning model to be used in the present project. For each goal in phases two and three, there are the same four components to be considered: project team planning, district readiness, staff development, and evaluation.

With goal identification and the preparation of a more detailed project plan submitted to the state in March 1982, Phase One of the project was completed. At that time the project began to gain momentum and commitment from the members of the Child Study Team. There were several factors that may account for this development. Working with outside consultants and attending statewide meetings, Child Study Team members became aware that they were part of a larger project. They began to meet weekly to consider their present mode of functioning and to consider specific changes in the system of appraisal. The enlarged project plan was accepted by the State Board of Education in April 1982. And finally the State Board of Education passed a resolution allowing the right to request waiver of special education rules and regulations providing that the demonstration district

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[1]Appreciation is expressed to the following team members for their cooperation and collaboration: Marie Smith, Joan Treiman, Ann Hovanec and Audrey Mesulam.

has an acceptable substitute plan. Hence a feeling grew that change could be implemented. It would appear that the basic requirements for an intervention activity are being met: 1) the development of valid information; 2) free and informed choice of participants; and 3) internal commitment to the choices made. (C. Argyris, 1977).

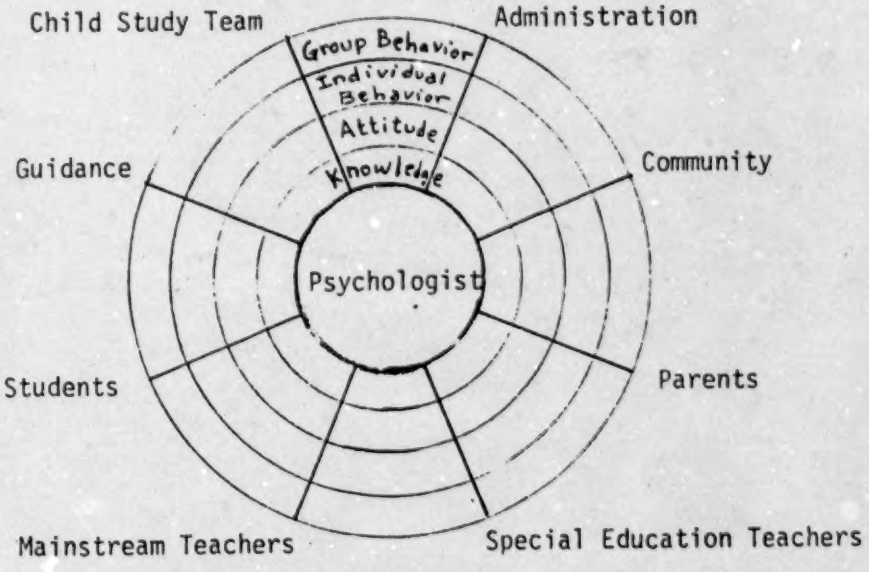
We are now in the process of converting our rhetorical plan into a format that will allow for evaluation (Maher, 1982). During the months of May and June baseline data from various reference groups have been collected. The Child Study Team has decided that during the next academic year, in Phase Two of the project they will focus on the design of revised appraisal procedures with an emphasis on pre-referral intervention. This proposal fits well with the local Comprehensive System of Personnel Development Plan for 1982-83. As part of the needs assessment for the 94-142 application, a survey in Oct. 1981 indicated that teachers, administrators, Child Study Team members, as well as parents, saw the area of pre-referral intervention as a priority in the district. Therefore, the Child Study Team, in order to be more effective at the pre-referral level, sees training in consultative skills as its greatest need.

Observing movement toward change in the district, in May the superintendent appointed a task force. Its goal is to monitor the development of an alternate non-categorical special education delivery system with emphasis on a pre-referral model. Members of the task force include a representative from the Child Study Team, a mainstream teacher, special education teacher, administrator, parent, and two high school students, mainstream and special education. The director of special services will chair the committee, and the social worker will serve as a facilitator. (See Appendix II).

Role of the School Psychologist

As the school district moves into planned change, the school psychologist can make a significant contribution. The psychologist, a system-wide professional, has the opportunity for contact with all reference groups. The following diagram suggests the network of communication the psychologist can develop.

Psychologist's Network of Communication



With more emphasis placed on instructional facilitation and delivery rather than testing for special education eligibility, the psychologist can become a model for other Child Study Team members. When the psychologist increases time with the teacher, principal, parent, or in the classroom and reduces time in testing and writing reports, other Child Study Team members will do the same. Prior experience in NJ suggests that other Child Study Team will share the focus of the psychologist, e.g., now it seems to be assessment.

The trend toward non-categorical special education opens the possibility for help for the mildly handicapped without necessarily the requirement of a battery of tests. Growing evidence may indicate that extensive assessment data collected on

students, particularly the learning disabled, have little impact on actual decisions related to placement. (J. E. Ysseldyke, B. Algozzine, L. Richey, and J. Graden, 1982). The movement away from individual intelligence testing to task analysis and the development of thinking skills, combined with the movement of special education students into the mainstream, open the way to more efficient and broadly-based use of the psychologist's skills. (Feuerstein, 1980; Maggs and White, 1982). The theme of classroom-based school psychology shared by all articles in the NJ Journal of School Psychology (1982) demonstrates that school psychologists recognize the possibilities for a more effective approach to services in the school.

As Alpert and Trachtman (1980) point out, if school psychologists increase environmental consultation, i.e., concentrate on understanding both the child's needs and the educational environment, there will be freedom for the psychologist to use consultative activity.

A four-level consultation model proposed by Meyers (1973) may be useful in this context. The assumptions in this model based on a review of other consultation approaches, are 1) emphasis on observable behavior and extra personal causes; 2) reduced time testing; 3) indirect service to children; 4) personal contact with school personnel. While traditional individual diagnostic techniques are used when necessary, consultation at levels beyond the individual child would become a major consideration (e.g., Meyers, 1975).

If this approach to school psychological services has validity, there are implications for training programs in school psychology. At the local level, the school psychologist (as well as other Child Study Team members) hesitates to relinquish a traditional role where much training in psychodiagnostics has been given both at the university and by the State Dept. of Education. Simultaneously, there is a recognition of the need for more training in consultation and other techniques pertinent to instruction. At the national level, a survey of 122 school

psychology programs indicates that 60% of them do not offer a course in consultation. (Meyers, Wurtz and Flanagan, 1981). If a shift is to occur from individual testing to consultation and from the office to the classroom, making the school psychologist a more effective problem solver, the school psychologist will need help to acquire other skills.

Appendix I

Activities in District Relating to a Planned Change Approach to Special Education

Sept.	1.	State Dept. consultants meet with superintendent and director of special services.
	2.	Director of special services reports to Child Study Team about the orientation meeting.
	3.	A meeting between state representatives and superintendent, director of special services, principals, and Child Study Team to discuss exploration of alternative special education delivery system.
Oct.	1.	Special education parent meeting
	2.	First proposal submitted to state
	3.	Monthly meeting of Child Study Team
	4.	Proposal circulated to Child Study Team, nurses, guidance, special education teachers and administrators for input.
Nov.	1.	First special education newsletter
	2.	State meeting for director of special services
Dec.	1.	Meeting with state consultants to discuss evaluation.
	2.	Parent meeting
	3.	Child Study Team meeting
Jan.	1.	Meeting with state consultants, Child Study Team and administrators.
	2.	State meeting

Appendix I

Activities in District Relating to a Planned Change Approach to Special Education

(CONTINUED)

Feb.

1. Status report to H.S. faculty.
2. Meeting with superintendent regarding task force.
3. Feuerstein seminar begun for interested teachers.

March

1. Child Study Team work meetings with state consultants. Developed goals.
2. Child Study Team began meeting weekly.
3. Second statewide meeting. Attended by director of special services and a learning disability teacher consultant.
4. Evening meeting for parents, community and staff with a presentation by state director of the special education demonstration project.
5. Seminar on mediated learning for Title I parents.

April

1. Brown bag lunch for parents to discuss March evening meeting.
2. Plan with goals and objectives submitted to state.
3. Plan distributed for discussion and comment to all reference groups.
4. Second special education newsletter.
5. Workshop on alternative testing EIC-NW. Attended by psychologist and a learning disability teacher consultant.

May

1. Third state meeting. Attended by director of special services, a learning disability teacher consultant and the speech therapist.
2. Child Study Team continues weekly work meetings.
3. Child Study Team and guidance meet to discuss pre-referral procedure in high school.
4. Superintendent appoints a task force to monitor change.

Appendix I

Activities in District Relating to a Planned Change Approach to Special Education

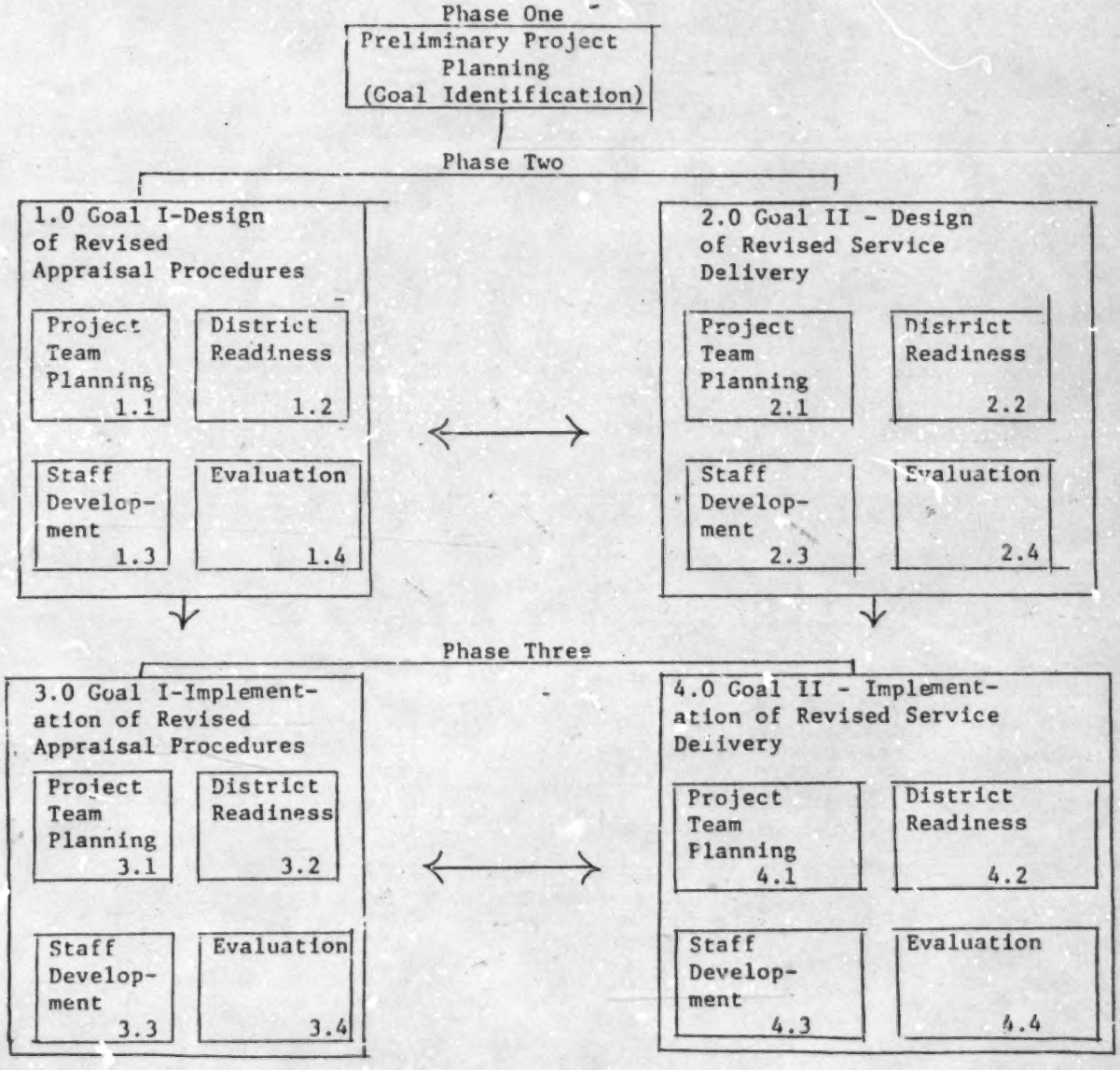
(CONTINUED)-

June

1. Rhetorical plan changed into an evaluable plan.
2. Baseline data gathered for evaluation.
3. First meeting of task force.
4. Third special education newsletter.

Appendix II

Project Plan for Exploration of an Alternate Special Education Delivery System[2]



[2]This graphic presentation of the model was developed by Grace Bingham and Lewis Gantwerk.

Appendix III

May, 1982

Task Force for an Alternate Special Education Delivery System

Goals: I. The task force will monitor the development of an alternate non-categorical special education delivery system. A pre-referral model will be emphasized.

Objectives: Members of the task force will .....

1. represent their constituency and seek input from them.
2. review district readiness in terms of the participating groups as we move toward implementing an alternate special education delivery system.
3. review the design of a more flexible appraisal system.
4. review needs for staff development.
5. review the program description that will replace the existing categorical approach.
6. review the evaluation of the alternate special education delivery system.
7. recommend to superintendent of schools appropriate action based on deliberations of the task force.

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